

In Re: JOHN R. CARTER & LINDA S. CARTER
2148 FOREST VIEW ROAD
ROCKFORD, IL 61108Trustee's Final Report
Case Number: 05-77864
SSN-xxx-xx-8429 & xxx-xx-9171Case filed on:
Plan Confirmed on:
11/28/2005
4/7/2006

D Dismissed

Total funds received and disbursed pursuant to the plan: \$10,226.00 Detail of Disbursements below:

Claim #	Name of the Claimant	Claimed by the Creditor	Allowed by the Court	Principal Paid	Interest Paid
772	CLERK OF U.S. BANKRUPTCY COURT	0.00	0.00	0.00	0.00
	Total Administration	0.00	0.00	0.00	0.00
000	ATTORNEY JEFFREY A BIVENS	3,350.00	3,350.00	2,851.37	0.00
	Total Legal	3,350.00	3,350.00	2,851.37	0.00
009	COMMONWEALTH EDISON	0.00	0.00	0.00	0.00
024	WE PROPERTY MANAGEMENT	0.00	0.00	0.00	0.00
029	NATIONAL CAPITAL MANAGEMENT LLC	0.00	0.00	0.00	0.00
	Total Legal	0.00	0.00	0.00	0.00
999	JOHN R. CARTER	0.00	0.00	0.00	0.00
	Total Debtor Refund	0.00	0.00	0.00	0.00
001	EC AUTO SALES	2,200.00	2,200.00	2,200.00	0.00
002	HEIGHTS FINANCE	2,358.63	500.00	500.00	20.64
025	WE PROPERTY MANAGEMENT	0.00	0.00	0.00	0.00
	Total Secured	4,558.63	2,700.00	2,700.00	20.64
002	HEIGHTS FINANCE	0.00	1,858.63	272.37	0.00
003	ADVANCE CASH EXPRESS	370.00	370.00	39.78	0.00
004	ADVANCE EXPRESS CASH	0.00	0.00	0.00	0.00
005	AMERICAN CASH N GO	3,816.28	3,816.28	559.25	0.00
006	SMC	217.09	217.09	23.34	0.00
007	CREDITORS PROTECTION SERVICE, INC	439.91	439.91	64.47	0.00
008	COMMONWEALTH EDISON	0.00	0.00	0.00	0.00
010	COUNTRY FARMS INC	1,491.23	1,491.23	218.53	0.00
011	CRUSADER CLINIC	261.00	261.00	28.07	0.00
012	DR. SRIVASTAVA	0.00	0.00	0.00	0.00
013	ACCOUNT RECOVERY SERVICES	6,291.60	6,291.60	922.00	0.00
014	IHC SWEDISH AMERICAN EMERGENCY PHYS	0.00	0.00	0.00	0.00
015	LAB ONE	0.00	0.00	0.00	0.00
016	OSF ST ANTHONY MEDICAL CENTER	625.41	625.41	83.52	0.00
017	RADIOLOGY CONSULTANTS OF ROCKFORD	0.00	0.00	0.00	0.00
018	ROCKFORD ANESTHESIOLOGISTS	0.00	0.00	0.00	0.00
019	ROCKFORD ASSOCIATED PATHOLOGISTS	351.20	351.20	37.76	0.00
020	ROCKFORD CARDIOLOGY ASSOCIATES, LTD	0.00	0.00	0.00	0.00
021	ROCKFORD E A S	77.00	77.00	0.00	0.00
022	SWEDISH AMERICAN HOSPITAL	8,235.99	8,235.99	1,206.93	0.00
023	SWEDISH AMERICAN ER PHYSICIANS	187.62	187.62	20.18	0.00
026	CITIFINANCIAL MORTGAGE COMPANY	0.00	0.00	0.00	0.00
027	ROCKFORD MERCANTILE AGENCY INC	3,621.20	3,621.20	530.64	0.00
028	MUTUAL MANAGEMENT SERVICES	0.00	0.00	0.00	0.00
	Total Unsecured	25,985.53	27,844.16	4,006.84	0.00
	Grand Total:	33,894.16	33,894.16	9,558.21	20.64

Total Paid Claimant: \$9,578.85
Trustee Allowance: \$647.15
Percent Paid Unsecured: 14.39

Wherefore, your petitioner prays that a final Decree be entered discharging the trustee and the trustee's surety from any and all liability on account of the within proceedings, and closing the estate, and for such other relief as is just. Pursuant to FRBP, I hereby certify that the subject case has been fully administered.

Report Dated:

/s/ Lydia S. Meyer

Lydia S. Meyer, Trustee

United States Bankruptcy Court

of the

Northern District Of Illinois

Western Division

This is to certify that a copy of this notice has been mailed to the debtor and the debtor's attorney.

Dated at Rockford, IL on 03/26/2009

By /s/Heather M. Fagan